-	PATE	NT APPLICA	ATION I	FEE DETER for Form PTO	a collection of information unless it displays a valid OMB control number.  RECORD Application or Docket Number  ON SOCIETY OF SOCIE					
CLAIMS AS FILED – PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN OR SMALL ENTITY	
		NUMBER EXTRA		RATE	FEE		RATE	FEE		
FOR BASIC FEE		NOMBE	NOMBER FILED NOMBE		· CATTO	1,7,7,7,5,5	s	OR		\$
(37 CFR 1.16(a)) TOTAL CLAIMS		21	21			x \$ =	1	OR	x \$/\(\frac{7}{2}\) =	1200
(37 CFR 1.16(c)) INDEPENDENT CLAIMS		S CB	B						x s =	1 8 40
(37 CFR 1.16(b)) minus 3 = 1					X \$=		OR			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$=		ÓR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	
	CL	AIMS AS AMÉ	NDED -	- PART II						
(Column 1) (Column 2) (Column 3)					SMALL E	NTITY	OR I	OTHEF SMALL		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total (37 CFR 1.16(c))	21	Minus	"2/	= XS	x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	- ap	Minus	9	= Q	x \$=	-	OR	x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ =		OR	+\$ =		
	THOTTESEN					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
7-	7-04	(Column 1)		(Column 2)	(Column 3)			_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	:20	Minus	. 21	_ C6 <sup>†</sup>	x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	5	Minus	··· 9	= 1/2	x \$=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ =		OR	+\$ =	1	
THOTANGENTIA						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Calumn 1)		(Column 2)	(Column 3)			_		
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		Minus	**	=	x \$=		OR	x \$=	
ME	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$=	
ENDME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	+ 5 =		
AMENDMENT		TATION OF MILITID	LE DEPEND	FNT CLAIM (37 C	FR 1.16(d))	1   + \$ =		I OK	+ \$=	

"" If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.